

Missouri

STATE BOARD OF NURSING NEWSLETTER

The Official Publication of the Missouri State Board of Nursing with a quarterly circulation of approximately 111,000 to all RNs and LPNs

Volume 10 • No. 1

February, March, April 2008

Message from the President

Authored by Dr. Teri A. Murray, PhD, RN
Board President

The Nursing Shortage and Nursing Education

There are 105 approved nursing education programs in Missouri: 45 practical and 60 professional nursing education programs. The professional education programs consist of one diploma school, 37 associate degree programs, and 22 baccalaureate nursing education programs. The Missouri State Board of Nursing provides regulatory oversight of all pre-licensure programs but does not provide approval for baccalaureate completion programs, commonly referred to as RN to BSN programs or graduate nursing education programs.



Murray

Despite the high numbers of nursing programs in Missouri, the State continues to experience a nursing and nursing faculty shortage. Data from the Missouri Hospital Association reveal a 7.5% hospital registered nurse FTE vacancy rate in 2006 as compared to 9.5 in 2005, 9.2 in 2004, 10.0 in 2003, 11.1 in 2002 and 10.6 in 2001; the Hospital LPN vacancy rate in 2006 was 6.5% as compared to 5.1 in 2005, 6.2 in 2004, 9.2 in 2003, 9.1 in 2002 and 10.8 in 2001, http://web.mhanet.com/asp/Workforce/pdf/2006_Workforce_Data.pdf.

Nationally, it is estimated that the shortage of registered nurses (RNs) will increase to 340,000 by the year 2020. This estimate is significantly less than earlier projections for a shortfall of 800,000 RNs which were made back in 2000, yet the authors note that the nursing shortage is still expected to increase significantly over the next 13 years (Auerbach, Buerhaus, & Staiger, 2007). National surveys of the nursing workforce found that majority of nurses reported that the RN shortage is negatively impacting patient care and undermining the quality of care goals set by the Institute of Medicine and the National Quality Forum (Buerhaus, P., Donelan, K., Ulrich, B., Des Roches, C. and Dittus, R., 2007).

Unfortunately the nursing shortage and its consequence on patient care can not be remedied without focusing on the faculty shortage. "The American Association of Colleges of Nursing (AACN) released preliminary survey data that show that enrollment in entry-level baccalaureate nursing programs increased by 4.98 percent from 2006 to 2007. Though this marks the seventh consecutive year of enrollment growth, the rate at which nursing Schools have been able to increase student capacity has declined sharply since 2003 when enrollment

Message from the President cont. to page 3

Executive Director Report

Authored by Lori Scheidt, Executive Director

The 2008 legislative session started on January 9, 2008 and goes through May 16, 2008. The Board of Nursing is seeking two legislative changes. The first is to remove the requirement that the state board of education determines the high school equivalent for RN licensure applicants. The second is to require collection of research data and share de-identified data for research purposes.



Scheidt

Rationale for Change in RN Licensure Requirement

Chapter 335.046 describes requirements for a license and includes the phrase, "The applicant shall be of good moral character and have completed at least the high school course of study, or the equivalent thereof as determined by the state board of education..." The high school equivalent is a problem with the increase of home schooled students. The statute doesn't say high school **diploma** or equivalent, just high school **course of study**. The Department of Elementary and Secondary Education web site contains disclaimers about home schooling and basically leaves it up to the school districts for transfers and to the colleges for admission. The part of the statute that says "as determined by the state board of education," is not relevant since the board of education doesn't play a role in determining what is equivalent.

Rationale for Authority to Collect and Share Research Data

The United States is in the midst of a nursing shortage that is expected to intensify as baby boomers age and the need for health care grows. Compounding the problem is the fact that nursing colleges and universities across the country are struggling to expand enrollment levels to meet the rising demand for nursing care.

The Missouri State Board of Nursing is concerned about the nursing shortage and continues to work with schools, policy makers, nursing organizations, and others on this health care crisis. Efforts need to be directed toward enacting legislation, identifying strategies, and forming collaborations to address the nursing shortage. A major barrier to solutions is the lack of evidence about the impact of the nursing shortage in Missouri.

The Missouri Department of Health, Missouri Nurses Association, Missouri Hospital Association, Missouri Association of Licensed Practical Nurses, Missouri League for Nursing, Missouri Organization of Nurse Leaders, health education systems, and the Board of Nursing all have a need to obtain good information from the data. We want to be able to collect the data and give de-identified datasets to interested parties for their own analysis. We have collaborated with all these agencies on

Executive Director Report cont. to page 2

GOVERNOR

The Honorable Matt Blunt

DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

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DIVISION OF PROFESSIONAL REGISTRATION

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EXECUTIVE DIRECTOR

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Inside this issue....

Executive Director Report	1
Licensure Corner	3
Investigations Corner	4
Legal Perspective	5
Discipline Corner	8
Practice Corner	9
Education Report	9
Disciplinary Actions	11

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Important Telephone Numbers

Department of Health & Senior Services (nurse aide verifications and general questions)	573-526-5686
Missouri State Association for Licensed Practical Nurses (MoSALPN)	573-636-5659
Missouri Nurses Association (MONA)	573-636-4623
Missouri League for Nursing (MLN)	573-635-5355
Missouri Hospital Association (MHA)	573-893-3700



Executive Director Report cont. from page 1



Members of the Malaysian Board of Nursing meet with members and staff of the Missouri Board of Nursing in October 2007.

this initiative. All agree the data should be collected through Professional Registration because we can offer data validity (a record for each licensed nurse).

Other Nursing Bills of Interest

Bills to authorize advanced practice registered nurses to prescribe controlled substances while operating under a controlled substance collaborative practice agreement have already been prefiled. The Missouri Nurses Association's web site contains some good research information on the history of advanced practice registered nurses at <http://www.missourinurses.org/>.

Your Role in the Legislative Process

Nurses represent over 28% of professionals licensed within the Missouri Division of Professional Registration.

The Fall 2003 issue of *Johns Hopkins Nursing* indicated that "by some estimates, 1 of every 45 potential voters is a nurse. But in the legislative arena, the nursing profession lacks the clout these numbers suggest."

We urge you to study all facets of the issue being considered and know your facts. Be able to tell your legislator what impact a bill will have on his or her constituents. Know the opposing viewpoint. Every issue has two sides.

As a licensed professional, you do have a voice in shaping the future of health care. You can meet with, call, write or e-mail your legislators. Let your legislators know how to reach you, your area of expertise and that you are willing to give them information on issues related to nursing. You can find information about the status of bills and how to contact legislators at <http://www.moga.state.mo.us>.

Malaysian Nursing Board Visit to the Missouri State Board of Nursing

The staff and two Board members of the Missouri Board of Nursing along with the Director of the Division of Professional Registration met with 14 members of the Malaysian Nursing Board on October 26, 2007.

The fourteen member Malaysian board was accompanied by Amiya Bhaumik, Ph.D, President, Lincoln College, Kuala Lumpur, Malaysia, Dr. Ikbai R. Chowdhury, Ph.D. Professor and Director of International Programs and Dr. Connie Hammacher, Professor and Department Head of the Nursing Department at Lincoln University in Jefferson City.

The purpose of the visit was to share experience and knowledge of nursing board roles and responsibilities.

In our discussions, we learned that we do have a great deal in common with our international counterpart; however, a few issues were very different. The Malaysian Nursing Board receives very few complaints related to drugs, whereas, Missouri has a high number of complaints in that area. Perhaps a contributing factor could be that penalties for possession, use, or trafficking in illegal drugs in Malaysia are severe, and convicted offenders can expect long jail sentences and heavy fines. Malaysian legislation provides for a mandatory death penalty for convicted drug traffickers. Individuals arrested in possession of 15 grams (1/2 ounce) of heroin or 200 grams (seven ounces) of marijuana are presumed by law to be trafficking in drugs.

The Malaysian Nursing Board indicated that the majority of their complaints are about what they referred to as "soft skills." They described soft skills and communication skills and tact when dealing with patients and families.

Another distinct difference is the age of nurses and age at retirement. The majority of their nurses are under age 30 where the majority of Missouri's nurses are over 45 years of age. Their nurses retire at around 57 years of age. Nurses over 30 gain experience and then leave the country to work. The older nurses are much in demand due to their knowledge.

The meeting allowed us to gain a more global perspective of the nursing profession.

References:

U.S. Department of State's web site http://travel.state.gov/travel/cis_pa_tw/cis/cis_960.html. Accessed December 13, 2007



Licensure Corner

*Authored by Angie Morice
Licensing Supervisor*

Missouri State Board of Nursing Licensure Committee Members:

Kay Thurston, ADN, RN, Chair
Charlotte York, LPN
Clarissa McCamy, LPN
Linda Conner, RN
Autumn Hooper, RN



Morice

LPN License Renewals

LPN licenses will expire on May 31, 2008. Renewal notices will be mailed to the last address on record with the Board 90 days prior to the license expiration date. If you have moved since your last renewal, it will be necessary for you to contact the Board with your address change. Failure to receive renewal notification does not relieve the licensee of his/her responsibility to maintain a current license. All LPN's must renew their license prior to the May 31, 2008 expiration date in order to practice nursing in Missouri.

All licensed practical nurses will have a one time reduced renewal fee of \$37.00 for the renewal period of January 1, 2008 through December 31, 2008. If you are renewing a lapsed LPN license, the \$50.00 lapsed fee will be required for a total of \$87.00.

RN license renewal fees

The one time registered nurse license renewal fee decrease expired December 31, 2007. The fee to renew an inactive registered professional nurse, beginning January 1, 2008, returned to \$80.00. The renewal fee for a lapsed registered professional nurse, beginning January 1, 2008, returned to \$130.00 (\$80.00 renewal fee plus a \$50.00 lapsed fee).

Working on a lapsed license

When a nurse works on a lapsed license, he/she must submit the Petition for License Renewal form along with the required renewal fee and lapsed fee. Along with the form and fee, stop working statements from both the nurse and employer are required. The stop working statements need to include the following:

The nurse's notarized statement:

- How you discovered that your license was not current;
- Date you discovered your license was not current;
- Date you notified your employer that you could not practice nursing;

- Date you ceased nursing practice; and,
 - Confirmation that you will not resume employment in a nursing position until your license is renewed.
- The statement from the employer:**
- Date employer received notification that your license was not current;
 - Date employer removed you from a nursing position; and,
 - Confirmation that you will not be allowed to resume a nursing position until your license is renewed.

The license will be renewed after the above information has been received, the information will then be forwarded to the Board Members to deliberate for possible discipline on the nurse's license.

Reporting a conviction or guilty plea on a licensure application or when petitioning for renewal

If a nurse has a conviction or guilty plea to report when applying for licensure or petitioning for renewal, they must submit a notarized statement explaining the circumstances of the conviction and court certified documents that show the disposition of the conviction. A permanent license or renewed license will not be issued until the notarized explanation and court certified documents are received. Under some circumstances, it may be necessary for the information submitted to be reviewed by the Board for approval of licensure or renewal.

Name and address changes

Please notify our office of any name and/or address changes immediately in writing. The request must include your name, license number, your name and/or address change and your signature. Methods of submitting name and/or address changes are as follows:

- By faxing your request to 573-751-6745 or 573-751-0075.
- By mailing your request to Missouri State Board of Nursing, PO Box 656, Jefferson City, Missouri 65102.

Contacting the Board

In order to assist you with any questions and save both yourself and our office valuable time, please have the following information available when contacting the Board:

- License number
- Pen and paper

Message from the President cont. from page 1

was up by 16.6 percent. While this increase represents a positive trend, AACN is concerned that more than 30,000 qualified applicants were turned away from baccalaureate nursing programs last year due primarily to an intensifying shortage of nurse faculty, <http://www.aacn.nche.edu/Media/NewsReleases/2007/enrl.htm> ¶1." Additional reasons for the inability of nursing education programs to accept all qualified pre-licensure students continue to be insufficient faculty, clinical placement sites, and classroom space.

Efforts to expand the nurse educator population are complicated by the fact that thousands of qualified applicants to graduate nursing programs are turned away each year. In 2006, AACN found that 3,306 qualified applicants were turned away from master's programs, and 299 qualified applicants were turned away from doctoral programs. The primary reason for not accepting all qualified students was a shortage of faculty, <http://www.aacn.nche.edu/Media/FactSheets/FacultyShortage.htm>. The shrinking pool of nursing faculty is limiting the ability to educate practicing nurses who aspire to teach.

According to Dr. Lancaster, president of the AACN, "A successful solution to the shortage of RNs and nurse faculty will require a collaborative effort on the part of the nursing profession, the health care system, the federal government, businesses, and all stakeholders."

As stated so well by Dr. Lancaster, "Together, we must remove barriers to pursuing a nursing education, provide incentives for nurses to advance their education, facilitate careers in academic nursing, and create practice environments that encourage professional practice and respect educational achievement."



Investigations Corner

Authored by Quinn Lewis,
Investigations Administrator

Complaint Reporting

Several articles have appeared in this column on the topic of filing complaints against licensed nurses. These primarily are intended for those who we receive the majority of complaints from—the mandated reporters. Some of this information may appear to be repetitive, but a proper investigation begins with the Board having as much information about the alleged incident as possible.



Lewis

As the Investigations Administrator, it is my responsibility to evaluate and then assign cases to our investigators. The evaluation of a complaint is a crucial component of the Board’s investigative process. Before a complaint is assigned to the investigator, we want to make sure that two things are true:

- Does the Board have jurisdiction over this matter?
- Does probable cause exist to believe there is a violation of the Nurse Practice Act?

It is difficult to determine the second point without sufficient information relative to the complaint. That evaluation process is assisted greatly when the required information is submitted with the initial report.

As previously mentioned, the investigation begins when the person making the complaint discovers the alleged misconduct. At that point, the person who discovers the act becomes an “investigator.” Facts are collected which may indicate a violation of the Nurse Practice Act has occurred. If, based on the facility’s findings, it is determined the employee will be terminated and the Board Of Nursing needs to be notified, we ask that the person responsible for submitting the report send all relevant information with the initial report. If facts are omitted, the initial evaluation by the Investigations Administrator will be hindered.

An example of a report that does not provide enough information for proper evaluation is:

We would like to inform you of the termination of nurse Jane Doe for unacceptable behavior.

In the above example, no details outlining the conduct of the nurse which resulted in a termination were included. Therefore, it would be very difficult to determine if a violation of the Nurse Practice Act has occurred. After reading the report, we can only determine that a nurse was terminated.

In a well written report, the reporter would not only report that the nurse was terminated; she/he would also outline and identify specific conduct which led to the termination. Any documentation that would give credence to the conduct cited in the report would be attached along with the names of any individuals who could provide a first hand, eye witness account of the incident. Below is an example of a report that provides enough information for proper evaluation:

On 12/3/07, during the 7am to 3pm shift, nurse Jane Doe, PN, was observed being verbally abusive to patients and physically aggressive towards staff. Ms. Doe, PN, cussed patient B.R. and shoved a co-worker. Also other co-workers stated that Ms. Doe had a strong smell of alcohol on her breath. Ms. Doe was asked to submit to a for cause drug screen. Ms. Doe tested positive for marijuana and had a B.A.C. of .06. Ms. Doe was subsequently terminated. This incident was witnessed by two other nurses, their names and contact information is listed below. The co-worker that was shoved gave a written statement. The co-worker’s statement and a copy of Ms. Doe’s drug screen are attached to this report.

The report identifies specific conduct. It provides dates and times of the alleged incident. It includes names of those who witnessed the conduct along with their contact information. There is documentation attached that further supports the allegation of misconduct and possible drug abuse. As you can see, it would be very easy to determine if there is probable cause to believe a violation of the Nurse Practice Act has occurred.

It takes a combined effort between the Board and all reporters of misconduct to protect the public. Therefore, we ask that all information and evidence be submitted at the time of the initial report. This would enable the board staff to determine if a violation of the Nurse Practice Act has occurred. We would appreciate your cooperation in this matter.

The Legal Perspective

Authored by Mikeal R. Louraine, B.S., J.D.
Legal Counsel

Update on Michael Taylor v. Department of Corrections, et al

Since I last wrote in this space, the United States Supreme Court has decided to hear the case of Baze and Bowling v. Kentucky, et. al. This case presents similar legal challenges to the lethal injection process. The process used by Kentucky is similar to Missouri's protocol which is the subject of the Taylor case. While it is possible that the Supreme Court could rule on the Baze case in such a way that it does not affect Missouri's protocol, that seems very unlikely. Even though the Supreme Court has not asked or ordered states to suspend executions until the case is heard, most states seem to have done so on their own. The hope, I believe, is that the Court will issue a broad decision that will allow all states to address the issue. Oral arguments are set for sometime in the spring session. A decision should be issued in the fall.



Louraine

Board Meeting Questions

If you read my column regularly, you know that classes of Missouri nursing students regularly attend our quarterly Board meetings. If time permits, the Board members answer questions from the students. In the past, I have repeated some of the questions and answers here that I thought might be interesting to this larger audience.

First, the Board was asked what the difference was between the two attorneys that appear at the Board meetings. Loretta Schouten often appears at Board meetings and acts as an advisor to the Board. Loretta is an attorney who is under contract with the Board. Loretta represents the Board in many disciplinary proceedings. She deals with licensees and their attorneys in negotiating Settlement Agreements and litigating cases before the Administrative Hearing Commission, Circuit Courts and the Courts of Appeal. She is not a State employee, but an independent contractor. She is not involved in the day to day operations of the Board. In my position, I deal with the day to day operations. I assist the Board in drafting legislation, drafting rules and policies. I have also had to deal with contract and human resources issues. I also handle all probation violations, the role Board meeting attendees see me in. The best way to view our roles is that I am the General Counsel, while Loretta is our Prosecuting Attorney.

Next, I was asked who Janet Wolken was and why her name keeps coming up in probation violation hearings. As I'm sure you're all aware, Janet is the Discipline Administrator. See her article and picture on another page. During probation violation hearings, one of the pieces of evidence I offer is a testimony affidavit from Janet. The affidavit contains information about the licensee and their individual cases. For example, the affidavit could state that the nurse entered into a Settlement Agreement with the Board on a certain date, the length of the probationary term, the conditions of the probation and whether or not the licensee has met those requirements. By using the

testimony affidavits, I am able to present a significant amount of information to the Board in a short amount of time. Without the use of the affidavits, I would be forced to call Janet as a witness for every hearing, have her sworn in, have her introduce herself and explain her duties, etc. etc. In addition to this being very time consuming, it would not make Janet very happy. Another added bonus is that it makes for a cleaner record if any licensee chooses to appeal. The Circuit Court or Appeals Court judge would get the same benefit as the Board members; a large amount of information in a convenient and condensed form. The only down side of using the affidavits is that the students who are observing the proceedings may feel a bit left out because they will not know all of the details of the case they are watching.

Next, what are missed calls and no shows? When a licensee is placed on probation due to drug or alcohol issues, they are required to contract with NCPS, Inc. to schedule and conduct random screens for drugs and alcohol. Once enrolled in the program, the licensee is required to call a 1-800 number every day to see if they have been chosen to submit to a test that day. They can also check on-line. However, if they fail to call or check on-line, NCPS notifies the Board that the licensee did not contact them on that date. Failure to check everyday is a violation of their contract with NCPS and a probation violation. Realistically, I am not going to file a probation violation for a single missed call. However, if a few missed calls are combined with a lack of documentation or late submission of documents, there is a very good chance that the licensee is going to be in front of the Board trying to explain their lack of compliance.

Next, is there an advantage to surrendering your license? At a recent probation violation hearing, I advised the Board that the licensee had contacted me and indicated that they wished to surrender their license in lieu of the hearing. The question naturally arose; Why? If a license is revoked or surrendered, the individual has to go through the entire application process, including passing the NCLEX, again. However, if a license is revoked, the individual has to wait a full year until they can re-apply. There is no such time restriction if a license is surrendered. In either circumstance, the individual will also have to go through additional scrutiny by the Licensure Committee. Some individuals also believe that it will look better if they surrender their license, as opposed to having it revoked. The Board reports all license actions to NURSIS, the national database. We report revocations and voluntary surrenders. Frankly, neither looks good. The only tangible benefit I can see is not having to wait the full year to re-apply.

Finally, the Board was asked if they are paid for their service on the Board. The answer, technically, is yes. Pursuant to §335.026.4 RSMo, Board members are compensated at a rate of \$50.00 per day, plus necessary expenses. That includes not just time spent at Board meetings, but also time spent preparing for meetings and time spent on telephone conferences, etc. In the end, the compensation received is in no way comparable to the amount of time and effort put into being a Board member. As Board President Teri Murray stated when the question was presented, Board members view their time spent as a Board member as their contribution to the profession.

My thanks to the interested students that provide me with questions I can use to fill this space.

Midwest Leadership Institute for Nurse Managers

The Missouri League for Nursing's Midwest Leadership Institute for Nurse Managers will be held **June 12-13, 2008** at the Truman Hotel, **Jefferson City**, Missouri.

This Institute will provide nurse managers with the leadership and business skills they need to enhance their role in today's challenging health care environment. The conference will offer progressive sessions focused on enhancing the nurse manager's leadership skills for immediate application at their facility. Expert speakers from across the state will share their knowledge and expertise with the attendees to improve job performance, work environment, and patient satisfaction.

For more information visit: http://www.monursing.org/education/edu_mlinm.htm

Midwest Leadership Institute for Nurse Educators

The Missouri League for Nursing's Midwest Leadership Institute for Nurse Educators will be held **June 11-13, 2008** at the Truman Hotel, **Jefferson City**, Missouri.

This Institute is the premier continuing education program for nurse educators in the academic and practice settings. The purpose of the Institute is to expand the leadership skills of the nurse educator in all health care settings and provide a means to enhance faculty development by preparing educators as "master teachers."

The results of this program will provide improved learning environments for new and experienced nurses. This is also a time to build relationships and network with health care leaders from other parts of the state.

A special two day session (June 11-12) will be held within the Institute especially for **New Deans/Directors**.

For more information visit: www.monursing.org/education/edu_mline.htm

Schedule of Board Meeting Dates Through 2008

March 5-7, 2008

June 4-6, 2008

September 10-12, 2008

December 3-5, 2008

Meeting locations may vary. For current information please view notices on our website at <http://pr.mo.gov> or call the board office.

If you are planning on attending any of the meetings listed above, notification of special needs should be forwarded to the Missouri State Board of Nursing, PO Box 656, Jefferson City, MO 65102 or by calling 573-751-0681 to ensure available accommodations. The text telephone for the hearing impaired is 800-735-2966.

Note: Committee Meeting Notices are posted on our web site at <http://pr.mo.gov>

The NCSBN Board of Directors Voted to Raise the Passing Standard for the NCLEX-PN Examination at Its Meeting on Dec. 5-7, 2007

Contact: Dawn M. Kappel

Director, Marketing and Communications
312.525.3667 direct
312.279.1034 fax
dkappel@ncsbn.org

CHICAGO—The National Council of State Boards of Nursing, Inc. (NCSBN) voted at its Dec. 5-7, 2007, meeting to raise the passing standard for the NCLEX-PN examination (the National Council Licensure Examination for Practical Nurses). The new passing standard is -0.37 logits on the NCLEX-PN logistic scale, 0.05 logits higher than the previous standard of -0.42. The new passing standard will take effect on April 1, 2008, in conjunction with the 2008 NCLEX-PN Test Plan.

After consideration of all available information, the NCSBN Board of Directors determined that safe and effective entry-level LPN/VN practice requires a greater level of knowledge, skills, and abilities than was required in 2005, when NCSBN established the current standard. The passing standard was increased in response to changes in U.S. health care delivery and nursing practice that have resulted in entry-level LPN/VNs caring for clients with multiple, complex health problems.

The Board of Directors used various sources of information to guide its evaluation and discussion regarding the change in passing standard. As part of this process, NCSBN convened an expert panel of 10 nurses to perform a criterion-referenced standard setting procedure. The panel's findings supported the creation of a higher

passing standard. NCSBN also considered the results of a national survey of nursing professionals including nursing educators, directors of nursing in acute care settings and administrators of long-term care facilities.

In accordance with a motion adopted by the 1989 NCSBN Delegate Assembly, the NCSBN Board of Directors evaluates the passing standard for the NCLEX-PN examination every three years to protect the public by ensuring minimal competence for entry-level LPN/VNs. NCSBN coordinates the passing standard analysis with the three-year cycle of test plan evaluation. This three-year cycle was developed to keep the test plan and passing standard current. A PDF of the 2008 NCLEX-PN Test Plan is available free of charge from the NCSBN Web site https://www.ncsbn.org/2008_PN_Test_Plan_Web.pdf.

The National Council of State Boards of Nursing, Inc. (NCSBN) is a not-for-profit organization whose membership comprises the boards of nursing in the 50 states, the District of Columbia and four U.S. territories.

Mission: The National Council of State Boards of Nursing (NCSBN), composed of Member Boards, provides leadership to advance regulatory excellence for public protection.

Media inquiries may be directed to the contact listed above. Technical inquiries about the NCLEX examination may be directed to the NCLEX information line at 1.866.293.9600 or nclexinfo@ncsbn.org.

The definition of a logit may be found on NCSBN's Web site at https://www.ncsbn.org/02_18_05_brief.pdf.

Discipline Corner

Authored by Janet Wolken, MBA, RN
Discipline Administrator

Missouri State Board of Nursing Discipline Committee Members:

- Charlotte York, LPN, Chair
- K'Alice Breinig, RN, MN
- Autumn Hooper, RN
- Clarissa McCamy, LPN
- Amanda Skaggs, RNC, WHNP



Wolken

The Department of Health and Human Services, Office of Inspector General has the authority to exclude individuals from participation in Federal health care programs. The Board of Nursing is interested in this exclusion list because it is listed as a cause for discipline in Statute Chapter 335.066 2.(15).

Licensees who are on this Federal exclusion list should understand that it is separate from a Board Order or Settlement Agreement issued by the Missouri State Board of Nursing.

I would like to thank the Department of Health and Human Services who provided the following explanation of the exclusion list.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Informational Bulletin from the Office of Inspector General

Facts You May Need To Know About Your Employment

The Office of Inspector General (OIG) of the U.S. Department of Health and Human Services has the authority to exclude from participation in the Federal health care programs any individuals and entities who have been convicted of certain offenses, sanctioned by other governmental agencies, or who have participated in inappropriate activities related to the provision of health care items and services as detailed below. Federal health care programs include Medicare, Medicaid, Tricare, Veterans Affairs, and all other programs that provide health benefits and are funded directly, in whole or in part, by the United States government (except the Federal Employee Health Benefits Program).

The Social Security Act (Act) authorizes the OIG to exclude individuals and entities based on particular circumstances. The Act specifies when the OIG must exclude and when the OIG may exclude. The OIG must exclude an individual or entity who has been convicted of:

1. Medicare- or Medicaid-related crimes (misdemeanor or felony)
2. Patient abuse or neglect (misdemeanor or felony)
3. Felony health care fraud (not related to Medicare or Medicaid)

4. Felony controlled substance violations

The OIG may exclude in several other instances. For example, the OIG may impose exclusions based on:

1. Convictions for misdemeanor health care fraud (not related to Medicare or Medicaid)
2. Convictions for misdemeanor controlled substance violations
3. Disciplinary actions taken by licensing boards or other Federal or State health care programs
4. Quality of care issues related to denial of services, excessive/unnecessary services, or substandard care
5. Prohibited activities such as false claims, fraud, kickbacks (with or without a conviction)
6. Defaults on health education assistance loans

Once a person is excluded, Federal health care programs will not pay for anything that the person furnishes, orders, or prescribes, regardless of what that person's job is. The exclusion affects, among others, the excluded person, anyone who employs or contracts with the excluded person, or any hospital or other provider where the excluded person provides services. The exclusion applies regardless of who submits the claims or requests for reimbursement and applies to all items or services, including administrative and management services, furnished by the excluded person. An excluded person may not be employed by a provider to perform functions for which the provider is paid, in whole or in part, by any Federal health care program. As a result, an excluded person generally may not be employed by a hospital, nursing home, or other institutional provider which participates in Federal health care programs. **The exclusion is nationwide in scope and applies to all health care professions and occupations.**

For example, if a nurse is excluded, he or she will be precluded from many types of employment in the health care field. Items or services furnished by the excluded nurse cannot be reimbursed, either directly or indirectly, by a Federal health care program. A nurse cannot work at a hospital, nursing home, or other institutional provider if the nurse's salary or fringe benefits are paid directly to the nurse or indirectly through the employer on a Federal health care program's cost report. These prohibitions apply regardless of whether the person excluded as a nurse now has a different license within the nursing field (e.g., LPN instead of RN), or changes fields and is now employed as a physician, secretary, administrator, information clerk, cafeteria worker, or any other position where the salary is reimbursed by Federal health care programs directly or on a cost report.

Once excluded, an individual or entity is not able to participate in Federal procurement and non-procurement programs and activities. For example, an excluded person cannot be granted Federal student loans or housing loans, nor will any excluded party be able to enter into any contract with the Federal government.

An exclusion does not affect an excluded individual's, or his/her family's, rights to receive personal benefits as a beneficiary of Medicare, Medicaid, or any other Federal health care program.

More information about exclusions, Frequently Asked Questions, and a Special Advisory Bulletin about the Effect of Exclusions, may be found on the OIG's Website at <http://oig.hhs.gov>. Then click on EXCLUSIONS DATABASE, and choose the information you wish to access.

April 2003



Practice Corner

*Authored by Debra Funk, RN
Practice Administrator*

Missouri State Board of Nursing Practice Committee Members:

- Amanda Skaggs, RNC, WHNP, Chair
- K'Alice Breinig, RN, MN
- Clarissa McCamy, LPN
- Teri Murray, PhD, RN
- Autumn Hooper, RN

APRNs and a Document of Recognition

There is still much confusion about Missouri's "Document of Recognition" (DOR) for Advanced Practice Registered Nurses (APRNs). By statute, 335.046, the Board of Nursing is only permitted to license RNs and LPNs. In order to provide a means of regulation of APRNs the decision was made to utilize the regulatory option of recognition. This level of regulation provides the public with information about special credentials. This recognition of credentials does not usually involve state inquiry into competence. The Missouri State Board of Nursing approves nationally recognized certifying bodies, like the American Nurses Credentialing Center (ANCC), to review a nurse's credentials and to develop/administer an appropriate examination to document competence. See 20 CSR 2200-4.100(6). Based upon successful completion of the criteria set by the certifying body and holding a permanent Missouri license as a RN, a nurse may apply for "Recognition" to practice as an APRN in Missouri in their specialty area. See 20 CSR 2200-4.100 (2)(A) 1-3. In the event there is not an approved certifying body and/or a certification exam, at this point in time, there is a process available to apply for uncertified status. See 20 CSR 2200-4.100 (3) (A).

To reiterate, receipt of certification from a certifying body does not grant the nurse privilege to practice as an APRN. The nurse **MUST** have a permanent license as a RN, current certification from their certifying body or approval from the Board of Nursing as uncertified and a "Document of Recognition" from the State of Missouri in order to practice as an APRN. Failure to do so can result in review by the Board of Nursing and possible discipline against your RN license. See statute 335.066, grounds for discipline.

We have also been asked several times recently about the wall units that used to be sent along with your licenses and recognitions. This practice was stopped in July 2003 when the Board of Nursing changed the format of the cards and went to the plastic cards. There had been many complaints about the paper cards and their lack of durability. Also, LEAD-R was coming down the pike and the plastic cards would facilitate that process. And since our rules and laws didn't require that a copy of your license or recognition be posted at your place of business, the necessity for providing the larger wall unit wasn't seen.



Funk



Education Report

Authored by Lori Scheidt, Executive Director

Missouri State Board of Nursing Education Committee Members

- Teri Murray, PhD, RN, Chair
- K'Alice Breinig, RN, MN
- Linda K. Conner, BSN, RN
- Kay Thurston, ADN, RN

Newly Appointed Board of Nursing Education Administrator

We are pleased to announce the appointment of an education administrator effective January 2, 2008.

Ingeborg "Bibi" Schultz was born in Germany and has lived in the United States a little over 30 years. Bibi began her professional career as a translator and soon realized that caring for patients was her calling. While spending nearly two decades at the bedside caring for often seriously ill patients, Bibi soon thought of passing her experiences on to new nurses and students. Her dream of nursing education turned into reality when she accepted her first position as a nurse educator in 1997. Since then she has earned her Master's degree in Nursing Education from the University of Missouri—Columbia and has served as the coordinator of a Practical Nursing program for several years. While teaching medical-surgical nursing and coordinating a nursing program, Bibi also cares for patients at the bedside on a part time basis. Bibi is highly dedicated to nursing as a profession and knows that quality nursing education remains the key to providing safe and effective patient care. Bibi is excited to join the Missouri State Board of Nursing and is looking forward to working with nurse educators throughout this state.



Scheidt

New Minimum Standards Effective December 30, 2007

The new minimum standards for practical and professional nursing program became effective December 30, 2007. You can access the new standards at <http://www.sos.mo.gov/adrules/csr/current/20csr/20csr.asp#20-2200>

December 2007 Board Decisions

At the Board's December 5-6, 2007 meeting, the Board made the following decisions related to new nursing programs.

- ♣ Grant initial approval to St. Louis College of Health Careers Practical Nursing Program in Fenton, Missouri.
- ♣ Grant initial approval contingent on an on-site survey and receipt of staffing plan to Colorado Technical University, Kansas City, Missouri for an accelerated bachelor of science in nursing program.



Save this date!
April 8-9, 2008

The Art and Science of Patient Safety

Capitol Plaza Hotel – Jefferson City, MO

Join national experts - including keynote speaker Dr. Michael Leonard of Kaiser Permanente - in discussions about sustaining improvement, communication and disclosure, health literacy, error reporting, medication safety, successful strategies in pre and post acute and acute care settings and other hot topics.

Network with other patient safety leaders and share your own successes through poster presentations at a conference proclaimed as “well worth the time and money” with “great speakers and good networking” by 2007 attendees.

Training in TeamSTEPPS, a system to improve teamwork, collaboration and communication will be available as an additional, optional session the afternoon of April 9.

Sponsorship opportunities, poster display applications, and additional information are at www.mocps.org. Registration will be available online in January 2008.



The Board of Nursing is requesting contact from the following individuals:

Carla Nay, PN & Angela Thomas, PN

If anyone has knowledge of their whereabouts, please contact Beth at 573-751-0082 or send an email to nursing@pr.mo.gov.

DISCIPLINARY ACTIONS**

Pursuant to Section 335.066.2 RSMo, the Board “may cause a complaint to be filed with the Administrative Hearing Commission as provided by chapter 621, RSMo, against any holder of any certificate of registration or authority, permit, or license required by sections 335.011 to 335.096 or any person who has failed to renew or has surrendered his certificate of registration or authority, permit or license” for violation of Chapter 335, the Nursing Practice Act.
**Please be advised that more than one licensee may have the same name. Therefore, in order to verify a licensee’s identity, please check the license number.

PROBATIONARY LICENSE

Listed below are individuals who were issued an initial probationary license or had their expired or inactive licenses renewed on a probationary status by the Board during the previous quarter with a brief description of their conduct.

Name	License Number	Violation	Effective Date of Restricted License
Angela Michelle Beesler Cabool MO	PN2007032720	On 6/20/04, 6/28/04, and 2/28/05, Licensee pled guilty to the misdemeanor offense of Passing Bad Checks. On her application, Licensee related to the Board that she had previously sought treatment for the misuse of prescribed medications.	10/15/2007 to 10/15/2009
Nicole Louise Berry Imperial MO	RN2007031165	From 12/19/06 to 1/28/07, a chart audit revealed more than 10 incidences of improper documentation. The documentation errors included: controlled substances being removed from the Pyxis without being documented as administered, improper wastage and controlled substances being removed from the Pyxis for patients that did not have orders for that controlled substance.	10/2/2007 to 10/2/2009
Amy B Blinder Saint Louis MO	RN133150	On 2/23/07, Licensee had forged a prescription for Oxycodone. Licensee did not have a valid prescription for Oxycodone. Further investigation revealed at least 15 other prescriptions forged by Licensee. Licensee admitted to the forgeries and admitted that she had been forging prescriptions since approximately September 2005.	11/7/2007 to 11/7/2012
Cordelia Helen Claiborne Springfield MO	PN2007029213	On 6/21/07, Claiborne’s license in the State of Kansas was disciplined for acts that would be grounds for which revocation or suspension is authorized in this state. Claiborne’s Kansas license is currently under probation.	9/19/2007 to 9/19/2012
Patrice Lynn Hartman Sedalia MO	PN2007029554	On 12/29/03, Licensee pled guilty to the Class C Felony of Stealing.	9/21/2007 to 12/28/2008
Heather M Hicks Saint Louis MO	RN2007029142	On 4/10/06, Licensee pled guilty to two counts of Deceptive Practice.	9/18/2007 to 9/18/2008

CENSURE

Name	License Number	Violation	Effective Date of Censured License
Kirk Lewis McKnight White Cloud KS	PN2004028684	Licensee left work unit without a licensed nurse to provide patient care.	Censure 10/30/2007 to 10/31/2007
Tracy L Phillips Forsyth MO	PN2000170523	Licensee practiced nursing while her license was lapsed.	Censure 11/28/2007 to 11/29/2007
Elizabeth Ann Schler Boonville MO	PN058153	Licensee practiced nursing while her license was lapsed.	Censure 11/28/2007 to 11/29/2007
Jennifer J Willard Eldon MO	PN2004025090	Licensee practiced nursing while her license was lapsed.	Censure 11/7/2007 to 11/8/2007

Disciplinary Action cont. to page 12

Summary of Actions
December 2007
Board Meeting

- Education Matters**
- Proposals for new programs**
- A proposal for an accelerated bachelor of science in nursing program was given initial approval contingent on an on-site survey for Colorado Technical University in Kansas City, MO.
 - A proposal for a practical nursing program was given initial approval for St. Louis College of Careers in Fenton, MO.
- Curriculum Changes**
- Request for curriculum revisions was approved for Three Rivers Community College, ADN Program.
 - Request for curriculum revisions was approved for St. John’s College of Nursing and Health Sciences, Southwest Baptist University, ADN Program.
 - Request for curriculum revisions was approved for St. Louis University, BSN Program.
 - Request for curriculum revisions was denied for Applied Technology Services/West County and Applied Technology Services/MET Center, PN Programs.
- Admission Revisions**
- Request for changes in admission start times was approved for Sanford Brown College, PN Program.
- Surveys**
- Numerous survey reports were reviewed and accepted.

Discipline Matters

The Board held 5 disciplinary hearings and 10 violation hearings.

Licensure Matters

The Licensure Committee reviewed 20 applications and 22 renewal applications. Results of reviews as follows:

Initial Applications

Approved—3

Approved with letters of concern—5

Applications approved with probated licenses—3

Denied applications—9

Renewal Applications

Issued letter of concern—10

Probated—3

Denied—3

Approved inactive status—2

Censure—2

Issued grave letter of concern—1

Revoked—1

In addition 11 letters of concern for unlicensed practice were issued.

Disciplinary Action cont. from page 11

PROBATION

Name	License Number	Violation	Effective Date of Probation
Thomas M Baker Ballwin MO	RN100052	Licensee failed to document the administration and/or wastage of Morphine Sulfate, Fentanyl, Lorazepam and Hydromorphone. On 1/31/07, Licensee submitted to a for-cause drug screen which was positive for Lorazepam and Morphine.	Probation 9/25/2007 to 9/25/2012
Brittany Kay Baugher Festus MO	RN2004019074	From 2004 to 2005, while on duty, Licensee diverted Dilaudid for her personal consumption. Licensee also consumed and abused alcohol in 2004 and 2005.	Probation 9/7/2007 to 9/7/2010
Jaime Anne Bohannon Sedalia MO	PN2004028901	On 7/26/06, Licensee pled guilty for possession of up to 35 grams of marijuana, unlawful use of drug paraphernalia and unlawful transaction with a child.	Probation 10/30/2007 to 10/30/2009
Christopher LaVan Clark Saint Louis MO	RN2003021367	On 7/29/04, Licensee was involved in a physical interaction with a psychotic patient.	Probation 9/5/2007 to 9/11/2007
Lisa Carol Colbert Willow Springs MO	RN2004018723	In June 2006, Licensee signed out Morphine and Demerol. Licensee failed to have a witness and a second signature attest to the wasting of these medications.	Probation 11/17/2007 to 11/17/2008
Jennifer A Diaz Liberty MO	RN2005026731	Between 1/30/07 and 2/4/07, License admitted to taking Tylox for her own personal use.	Probation 11/20/2007 to 11/20/2010
Damian G Eickhoff Hazelwood MO	RN145310	On April 1, 2004, Licensee diverted Demerol and Morphine for his personal use. On April 13, 2004, Licensee diverted Fentanyl and Morphine for his personal use. On April 20-21, 2004, Licensee diverted Fentanyl for his personal use. On April 29, 2004, Licensee diverted Fentanyl for his personal use.	Probation 9/25/2007 to 9/25/2012
Lee R Fairchild Potosi MO	PN054983	On 2/27/07, a patient in Licensee's care had fallen out of bed and Licensee charted that she notified the patient's family and physician. Licensee had not reported the fall to the patient's family or physician and in fact falsely documented that she reported the incident.	Probation 11/24/2007 to 11/24/2008

Disciplinary Action cont. to page 13

Disciplinary Action cont. from page 12			
Name	License Number	Violation	Effective Date of Probation
Gina Marie Fiala Hazelwood MO	RN2005007534	On 12/8/06, Licensee applied for employment and submitted to a drug screen which tested positive for marijuana.	Probation 11/28/2007 to 11/28/2008
Bonnie S Gerber St Joseph MO	PN054152	On 1/24/06, Licensee submitted to a drug screen which tested positive for Marijuana.	Probation 10/10/2007 to 10/10/2009
John C Grannemann Union MO	PN054337	On 8/10/06, Licensee was verbally abusive.	Probation 11/7/2007 to 11/7/2008
Angela D Grider Savannah MO	PN045545	Licensee violated the terms of the disciplinary agreement by not submitting the required documentation.	Probation 9/25/2007 to 9/25/2012
Lisa A Hagan O Fallon MO	RN099502	Licensee violated the terms of the disciplinary agreement by not submitting the required documentation. On 4/20/07, Licensee submitted a urine sample for random drug screening which tested positive for Tramadol.	Probation 9/25/2007 to 9/25/2010
Carolyn E Harrington Saint Louis MO	RN2000164704	On 8/13/04, Licensee reported for work under the influence of alcohol.	Probation 10/13/2007 to 10/13/2010
Linda L Haskins St Clair MO	RN085813	From 5/20/07 through 6/15/07, the chart audit noted 42 Percocet dosages, one Propoxyphene Napsylate dosage, one meperidine dosage, one fentanyl dosage and one morphine dosage that were withdrawn from the Pyxis and not charted.	Probation 11/16/2007 to 11/16/2010
Disciplinary Action cont. to page 14			

Disciplinary Action cont. from page 13

Name	License Number	Violation	Effective Date of Probation
Kellie M Hoekstra Eureka MO	PN053593	On 4/21/06, Licensee submitted to a random drug screen which was positive for the presence of Hydrocodone. Licensee did not have valid prescription for Hydrocodone. On numerous occasions, Licensee administered Vicodin. Licensee failed to document the administration of Vicodin in the resident's chart or in the nursing notes.	Probation 11/26/2007 to 11/26/2009
Scott A. Hurd Nevada MO	RN2003027211	On 9/20/04, Licensee was working when one of the residents to whom Licensee was assigned complained of pain and requested pain medication. Licensee failed to assess the resident who requested pain medication in order to determine the type and severity of the resident's pain and document his condition. Without assessing resident, directed a nurse aide to give the resident pain medication. Licensee falsely documented in the resident's chart that he had administered the medication himself.	Probation 11/10/2007 to 11/10/2009
Cynthia A Jackson Ironton MO	RN091437	On 11/10/05, while on duty, Licensee's blood alcohol content was 0.262 and 15 minutes later it was 0.258. Her drug screen was negative.	Probation 9/15/2007 to 9/15/2010
Deborah L Johnston Farmington MO	RN124125	On 5/19/06, Licensee submitted to a urine drug screen which tested positive for PCP, Alcohol, Barbiturates and Benzodiazepines. Another in-house test was performed and it confirmed positive for Barbiturates, Benzodiazepines and Methadone.	Probation 11/7/2007 to 11/7/2012
Sherri L Jones Grain Valley MO	PN051493	From 7/1/04 to 8/1/04, Licensee was assigned to care for a resident. Licensee failed to document the ordered blood glucose test results in the charts. From August 2004 through October 2004, Licensee retained expired medications and did not dispose of expired medications.	Probation 11/16/2007 to 11/16/2008
Lisa K Knold Kansas City MO	RN143990	Licensee violated the terms of the disciplinary agreement by not submitting the required documentation and consuming alcohol.	Probation 9/25/2007 to 9/25/2012
Margaret Ann Kriwiel Mexico MO	RN2006004023	Licensee violated the terms of the disciplinary agreement by not submitting the required documentation.	Probation 9/25/2007 to 9/25/2010
Joan M Kunert Rolla MO	RN097076	On 12/2/02, Licensee received a telephone order from a physician instructing Licensee to discontinue an order. Licensee did not transcribe the physician's order in the patient's chart. Because Licensee did not transcribe the physician's order in the patient's chart, the patient received another dose. On 9/10/03, Licensee received and transcribed a telephone order from a physician ordering that the morning dose be administered with the afternoon dose. Licensee transcription failed to specify which medication had been missed and was to be administered with the afternoon dose. Licensee also failed to note the order in the MAR. From 9/8/03 to 9/15/03, Licensee failed to document a patient's assessments. On 9/10/03, Licensee photographed the patient's condition, but failed to properly file that photograph in the assessment book.	Probation 11/7/2007 to 11/7/2009

Disciplinary Action cont. to page 16

Number of Nurses Currently Licensed in
the State of Missouri

As of January 29, 2008

Profession	Number
Licensed Practical Nurse	24,655
Registered Professional Nurse	85,299
Total	109,954

Disciplinary Action cont. from page 14			
Name	License Number	Violation	Effective Date of Probation
Ann M Laas Gravois Mills MO	PN041034	On 12/8/06, Licensee tested positive for marijuana during a random urine drug screen.	Probation 11/21/2007 to 11/21/2008
Donald J Latimer Kansas City MO	RN074808	On 11/11/81 and 9/22/92, Licensee was convicted of DWI. On 5/10/82, Licensee was convicted of driving with a suspended or revoked license. On 10/12/89, Licensee was convicted of DWI. On 7/29/03, Licensee was convicted of DWI and driving with a suspended or revoked license. On 11/20/03, Licensee was convicted of DWI. On 4/25/05, Licensee was convicted of DWI and driving with a suspended or revoked license. In addition to the convictions outlined Licensee has also been convicted of driving without a license, speeding, failure to keep right, following too closely, leaving the scene of an accident and careless and imprudent driving.	Probation 11/21/2007 to 11/21/2012
Aida G Lawrence Kansas City MO	RN1999140166	Licensee violated the terms of the disciplinary agreement by not submitting the required documentation.	Probation 9/25/2007 to 9/25/2010
Joseph A Lopez Kansas City MO	RN140100	From September 2006 to December 2006, Licensee diverted Demerol.	Probation 11/10/2007 to 11/10/2010
Joann M Luedke Olathe KS	RN111407	On 5/16/06, Licensee entered an agreement with the Kansas State Board of Nursing.	Probation 9/18/2007 to 5/16/2009
Ronald P Marino New Haven MO	RN152231	Licensee withdrew excessive amounts of Fentanyl.	Probation 9/20/2007 to 9/20/2012
Kathryn J McGhee Wentzville MO	RN105395	On 9/30/04, Licensee submitted to a random drug screen which tested positive for Meperidine.	Probation 9/8/2007 to 9/8/2009
Carol L Melcoln Brookline Station MO	RN097907	On 1/4/04, Licensee failed to assess and change the dressing of an IV site. On 3/29/04, Licensee failed to assess breathing difficulty and another nurse on duty aided Licensee's patient by clearing their air way. On 5/14/04, Licensee administered morphine to a patient without a physician's order. On 9/22/04, Licensee was caring for a patient with a TPA drip. Licensee was instructed by a physician to start a Heparin protocol. Licensee failed to start the protocol as instructed.	Probation 9/5/2007 to 9/5/2008
Disciplinary Action cont. to page 17			

Disciplinary Action cont. from page 16			
Name	License Number	Violation	Effective Date of Probation
Terri J Michael Memphis TN	RN2005014339	Licensee repeatedly stole Morphine and Demerol for personal consumption.	Probation 9/25/2007 to 7/17/2010
Hope Moore Aurora CO	PN2003030091	Licensee had numerous medication errors and incomplete documentation resulting in termination.	Probation 11/24/2007 to 11/24/2008
Michael Eric Prock Lebanon MO	RN2003002504	From November 2005 to January 2006, Licensee admitted to diverting Meperidine for his personal consumption at least once every shift that he worked.	Probation 11/17/2007 to 11/17/2012
Brent A Reich Auxvasse MO	PN054693	On 5/11/06, Licensee followed a female patient into her room to administer an injection. Licensee had previously been instructed to have a witness when entering clients' rooms, however, Licensee failed to do so on this occasion. An employee entered the female patient's room and observed Licensee kissing the patient's neck and Licensee and the patient were hugging and their bodies were touching. Licensee admitted to placing his hand on the patient's hip, and then the patient rubbed the top of Licensee's head and leaned her face against Licensee's. Licensee was placed on the Department of Mental Health employee disqualification list.	Probation 9/14/2007 to 9/14/2008
Phyllis M Robinson Florissant MO	PN053494	Licensee received a formal reprimand. Among the concerns were: five grievances received in less than two months, multiple complaints about demeanor, unprofessional behavior: making inappropriate gestures toward patients, disrespectful toward patients making inappropriate statement and refusal to pass medication.	Probation 10/20/2007 to 10/20/2008
Tina L Rotermond Lewis Center OH	RN132929	Licensee knowingly made false statements for the purpose of obtaining Percocet and Vicodin.	Probation 11/13/2007 to 11/13/2008
Sharon D Ruff Saint Louis MO	RN128211	On 6/17/05, while on duty, Licensee's blood alcohol level was determined to be .168 g/dl.	Probation 11/29/2007 to 11/29/2010
Janice C Rye Santa Rosa NM	RN113945	On 1/7/06, Licensee placed a patient in four point mechanical restraints. Licensee did not have approval from the physician on-call. Licensee admitted that she said, "I am going to teach her (the patient) a lesson."	Probation 10/3/2007 to 10/3/2008
Carla D Santee Kansas City MO	RN134924	While employed at a home health agency, Licensee failed to properly supervise an LPNs care of a patient.	Probation 9/5/2007 to 9/5/2008
Roxanne A Schuster Mountain Grove MO	RN143391	On 3/17/04, on at least six occasions instead of properly disposing of excess amounts of Nubain, Licensee gave the excess Nubain to a patient who had no valid prescription or physician order for Nubain. On 3/28/04, licensee accepted another employee's password and used it to document her disposal of 20 milligrams of Nubain. On 3/31/04, licensee discharged a patient five minutes after administering Nubain by injection the policy dictates a 20 minute waiting period after a patient is given an injection. On 5/23/04 failed to document disposal of 7.5mg of Nubain. On 5/24/04 failed to document wasting 5mg of Nubain and 7.5 mg of Nubain. On 5/24/04 removed 2mg of Lorazepam and failed to document how much was administered or if any was disposed of. On 6/4/06 admitted to removing 20 mg of Nubain for her personal use. On 6/4/06 admitted she administered four of six ordered Vicodin tablets and placed the remaining two tablets in her purse for her personal use. On 6/4/06, licensee removed a 20 mg amp of Nubain, a 10 mg amp of Nubain and one vial of Vistaril for her own personal use.	Probation 10/3/2007 to 10/3/2012
Disciplinary Action cont. to page 18			

Disciplinary Action cont. from page 17

Name	License Number	Violation	Effective Date of Probation
Kimberly A Short Joplin MO	RN155887	On 11/4/04, Licensee failed to properly evaluate patient health conditions and falsified patient's record.	Probation 11/10/2007 to 11/10/2009
Sharon Lee Sisco Pleasant Hope MO	PN014127	On 7/14/05, Licensee did not report a patient's low blood pressure to the charge nurse. The physician prescribed a specific dialyzer to be used for the patient's treatment. In two attempts to administer the patient's treatment, Licensee failed to use the prescribed dialyzer. While attempting to change the patient's dialyzer, Licensee failed to attach the Hanson connectors from the old dialyzer to the new dialyzer.	Probation 9/7/2007 to 9/7/2008
Harold Curtis Smith Republic MO	RN2006012513	In July of 2006 until November of 2006, Licensee diverted Vicodin, Morphine and Fentanyl.	Probation 11/10/2007 to 11/10/2012
Debora Morris Stubbs Joplin MO	RN2006033730	Licensee's patient was on a Levophed drip, the drip should have been connected to the patient at all time and at one point Licensee disconnected the drip to take the patient to the restroom instead of taking the IV to the restroom with the patient. Licensee mistakenly replaced a TPN bag with a small bottle of Diprovan.	Probation 10/10/2007 to 10/10/2008
Michelle J Cheatem Thornton Kansas City MO	RN122754	On 3/15/07, Licensee was asked if she would submit to voluntary drug and alcohol test which came back positive for alcohol and cannabiniods.	Probation 10/10/2007 to 10/10/2010
Scott Lane Vantine Kansas City MO	RN2003016039	On 7/24/06, Licensee submitted to a urine drug screen which was positive for Marijuana and Fentanyl. On 7/24/06, Licensee was charged with possession of a controlled substance. On 7/24/06, Licensee reported self-injecting Fentanyl, while on duty, as well as possessing and consuming Marijuana to curb withdrawal symptoms.	Probation 9/25/2007 to 2/14/2010
Frederika Villhard Webster Groves MO	RN132519	In June 2005, Licensee did not show up for patients and failed to complete paperwork. Licensee's employer made several attempts to contact licensee regarding why patients were not being seen and why paperwork was not being turned in. Upon arriving at Licensee's home, her employer found a bag in Licensee's home with numerous unfinished documents and unlabeled blood vials. Also, a search of Licensee's car turned up more unfinished documents.	Probation 10/10/2007 to 10/10/2008
Susan R Volner Saint Joseph MO	RN110391	Licensee was questioned regarding narcotic discrepancies. She was asked if she would submit to a drug test. At that time Licensee stated to staff that she had used methamphetamine before coming to work. She was terminated and did not complete the test.	Probation 11/18/2007 to 11/18/2012

SUSPENSION/PROBATION

Name	License Number	Violation	Effective Date of Suspension
Joyce B Prusaczyk Saint Louis MO	RN050128	From 1//7/05 through 2/1/05, Licensee had removed 68 Percocet tablets from patient medication "bubble cards" and replaced the Percocet tablets with extra strength Tylenol tablets. On 5/19/05, Licensee was arrested for stealing Percocet. Licensee was placed on the Department of Health and Senior Services Employee Disqualification List.	Suspension 11/17/2007 to 11/17/2008 Probation 11/18/2008 to 11/18/2013

Disciplinary Action cont. to page 19

Disciplinary Action cont. from page 18

REVOKED

Name	License Number	Violation	Effective Date of Revocation
Tammy J Bennett Ozark MO	RN126198	On 7/16/07, Licensee removed a scheduled narcotic using her own account number from a previous date of service at the hospital. The system report indicates her name as the patient as well as the user who removed the medication. On 10/17/05, Licensee took morphine that was not ordered and the patient denied receiving the medication. Two instances showed two missing narcotics charged to patients that did not have orders or documentation that the medication was given.	Revoked 11/1/2007
Nancy E Biggs Saint Louis MO	RN085062	Licensee violated the terms of the Probated License Order by not submitting the required documentation and by testing positive for ethanol.	Revoked 9/19/2007
Rhonda Marlene Billmeyer Saint Louis MO	RN2003022368	Licensee violated the terms of the disciplinary agreement by not complying with NCPS, Inc. regulations.	Revoked 9/19/2007
April Alice Bungart Eldon MO	PN056710	Licensee pled guilty to receiving stolen property.	Revoked 9/19/2007
Lori S Clawson Wright City MO	RN086236	Licensee violated the terms of the disciplinary agreement by not complying with the NCPS, Inc. regulations and she tested positive for ethanol.	Revoked 9/19/2007
Markel C Fitchpatrick, Jr Blodgett MO	PN2001002245	Licensee failed to contract with NCPS, Inc.; failed to have a Chemical Dependency Evaluation and a Mental Health Evaluation completed.	Revoked 11/1/2007
Anne Marie Hansen Cedar Rapids IA	RN2006029955	A review of the accu-dose machine revealed a pattern of inappropriate dispensing with no documentation showing that narcotics were scanned and/or administered to the patient and discrepancies between narcotics dispensed and physician orders.	Revoked 9/19/2007
Teresa L King Bonne Terre MO	PN043160	Licensee tested positive for THC on a random drug screen.	Revoked 9/19/2007
Melissa Kay McAllister Galena KS	RN2002024737	Licensee was calling prescription medications to a local pharmacy for herself.	Revoked 9/21/2007
Laura K McCray Williamsburg MO	PN054658	Licensee failed to comply with NCPS regulations. Licensee failed to call NCPS on fifty-five (55) days and failed to report to a lab for a urine sample on two different occasions.	Revoked 11/1/2007
Tamara L Rossi Ozark MO	RN119330	Arrested for possession of methamphetamine.	Revoked 9/19/2007
Rachel D Scroggins Saint Joseph MO	RN154004	The Kansas State Board of Nursing received a risk management report on 3/4/06, several narcotics were missing from the cart. Licensee tested positive for morphine and the charge nurse tested negative. Further investigation revealed an empty Roxinal bottle hidden under a cabinet in the medication room. In April 2006, Licensee was terminated due to frequent tardiness. On 4/10/06, 150 4 mg. hydromophone tablets were missing per pharmacy. Further investigation found 1/2 bottle of Hydrocondone was missing, as well as other medications.	Revoked 9/19/2007
James M Steele Saint Joseph MO	RN144886	Licensee violated the terms of the disciplinary agreement by not complying with the requirements of NCPS, Inc.	Revoked 9/19/2007
Barbara L Thomas Harrisonville MO	PN046283	Documentation was received indicating that Licensee was revoked in Kansas for failure to comply with KNAP. Licensee tested positive for alcohol and cannabinoids. Licensee was also placed on the Federal EDL list in December 2006.	Revoked 11/1/2007

VOLUNTARY SURRENDER

Name	License Number	Violation	Effective Date of Voluntary Surrender
Lisa M Hopper Linn MO	PN050412	Licensee tested positive for marijuana in a pre-employment drug screen. Licensee denied smoking marijuana and stated that she was on medication for MS. During the investigation, Licensee admitted to the investigator that she had smoked marijuana.	Voluntary Surrender 10/27/2007
Carolyn J Mezines Cuba MO	PN032926	Licensee falsely documented visits to patients. DHHS placed licensee on EDL list.	Voluntary Surrender 11/23/2007
Susan E Smith Leawood KS	RN100385	On 11/22/06, Licensee diverted and self-injected Fentanyl.	Voluntary Surrender 11/5/2007
Jennifer Lynn Stoner Taylor MO	RN2007011595	Licensee failed to fulfill the requirements of the NCPS, Inc. contract. The Board never received a Chemical Dependency Evaluation or Employment Evaluations submitted on behalf of Licensee.	Voluntary Surrender 11/5/2007

Did you know you are required to notify the Board if you change your name or address?

Missouri Code of State Regulation [(20 CSR 2200-4.020 (14)(b) (1)] says in part “If a change of name has occurred since the issuance of the current license, the licensee must notify the board of the name change in writing . . .” and (2) If a change of address has occurred since the issuance of the current license, the licensee must notify the board of the address change . . .”

Note: change of address forms submitted to the post office will not ensure a change of address with the Board office. Please notify the board office directly of any changes.

Type or print your change information on the form below and submit to the Board Office by fax or mail. Name and/or address changes require a written, signed submission. Please submit your change(s) by:

- Fax: 573-751-6745 or 573-751-0075 or
- Mail: Missouri State Board of Nursing, P O Box 656, Jefferson City, MO 65102

Please complete all fields to ensure proper identification.		
<input type="checkbox"/> RN <input type="checkbox"/> LPN		
Missouri License Number		
Date of Birth		
Social Security Number		
Daytime Phone Number		
OLD INFORMATION (please print):		
First Name	Last Name	
Address		
City	State	Zip Code
NEW INFORMATION (please print)		
First Name	Last Name	
Address (if your address is a PO Box , you must also provide a street address):		
City	State	Zip Code
Signature (required)		
Date		

Duplicate license instructions:

It is not mandatory that you obtain a duplicate license. You may practice nursing in Missouri as long as your Missouri nursing license is current and valid. If you wish to request a duplicate license reflecting your new name, you must return ALL current evidence of licensure and the required fee of \$15.00 for processing a duplicate license.

Return this completed form to: Missouri State Board of Nursing, P O Box 656, Jefferson City, MO 65102

Is Your License Lost or Has It Been Stolen?

If you would like to obtain a duplicate license because your license has been lost or stolen. Please contact our office and request an Affidavit for Duplicate License form or you may obtain it from the Licensure Information & Forms tab on our website at <http://pr.mo.gov/nursing.asp>